PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number

Effective October 1, 2003

10689220

								10001220					
		CLAIMS A	S FILED (Column		(Column 2)			ALLE	NTITY	OR	OTHER	R THAN ENTITY	
TOTAL CLAIMS			9		; ;-		Г	RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ВА	ASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			9 minus 20=		*			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			∠/ m	inus 3 =	* /			X43=		OR	X86=	86	
Мι	JLTIPLE DEPEI	NDENT CLAIM P	RESENT					+145=		1	+290=	06	
* 11	the difference	e in column 1 is	less than zero, enter "0" in colum			column 2		OTAL		OR OR	TOTAL	256	
CLAIMS AS AMENDED - PART II								0 .,	<u> </u>] 011	OTHER		
		(Column 1)				(Column 3)	S	SMALL ENTITY			SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	>	K\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=)	X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								145=	:	OR	+290=		
TOTAL											TOTAL		
ADDIT. FEEOR ADDIT. FEEOR ADDIT. FEE													
		(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST											
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	** .	*	=	×	(\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	×	(43=		OR	X86=		
	FIRST PRESE	NTATION OF ML	ILTIPLE DEF	PENDENT	CLAIM		+	145=		OR	+290=		
								TOTAL IT. FEE		OR A	TOTAL DDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA	R	ATE	ADDI- FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	X	43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							45=		OR	+290=		
* 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									_ L	TOTAL		
***	f the "Highest Nur	mber Previously Pa ber Previously Paid	id For" IN THIS	S SPACE is	less than	1 3, enter "3."		T. FEE L			DDIT. FEE L mn 1.		